



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C111209

1. DATE OF REPORT 3/26/2012	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE HOPPE FOR COUNCIL	
3. COMMITTEE MAILING ADDRESS 607 BLUFFDALE CITY / STATE / ZIP COLUMBIA MO 65201	4. COMMITTEE TELEPHONE NUMBER (573) 424-9668
5. TREASURER'S NAME VICKY RIBACK WILSON	
6. TREASURER'S MAILING ADDRESS 3201 BLACKBERRY LANE CITY / STATE / ZIP COLUMBIA MO 65201	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 449-1747 WORK:
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER VICKI HOBBS	
9. DEPUTY TREASURER'S MAILING ADDRESS 4001 COATS LANE COLUMBIA MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 289-4067 WORK:
11. DATE OF ELECTION 4/3/2012	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 2/19/2012 THROUGH 3/22/2012	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY BARBARA HOPPE 607 BLUFFDALE COLUMBIA MO 65201 (573) 424-9668 COUNCIL PERSON CITY OF COLUMBIA <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> NON-PARTISAN	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input checked="" type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Mar 26 2012 4:11PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Mar 26 2012 4:11PM _____ CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
HOPPE FOR COUNCIL	3/26/2012	

Receipts	A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported		\$ 11,394.84		
2. All Monetary Contributions Received This Period	\$ 6,635.00		Money On Hand	
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 6,635.00		24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 8,522.16
6. In-kind Contributions Received This Period	+ 62.32		25. Monetary Receipts this Period (From Item 5 - this page)	+ 6,635.00
7. Total All Receipts This Period (Sum 5A + 6A)	\$ 6,697.32		26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23)	- 3,288.65
8. Total All Receipts This Election (Sum 1B + 7A)		\$ 18,092.16	a) Disbursements By Check \$ 3,288.65 b) Disbursements By Cash \$ 0.00	
Expenditures	A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported		\$ 2,728.84	27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 11,868.51
10. Expenditures made by cash or check this period	\$ 3,288.65		Indebtedness	
11. In-Kind Expenditures made this period	+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 1,239.53			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 4,528.18		28. Outstanding Indebtedness at the beginning of this period	\$ 750.00
14. Total Expenditures This Election (Sum 9B + 13A)		\$ 7,257.02	29. Loans Received This Period	+ 0.00
Contributions Made	A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported		\$ 0.00	30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 1,239.53
16. All Contributions Made This Period (25A or 25B of CD3)	A 0.00 B 0.00	↔ Cash/Check ↔ Credit Card	B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
17. All In-Kind Contributions Made This Period	+ 0.00		31. Payments Made on Loans This Period	- 0.00
18. Total Contributions Made This Period (Sum 16A + 17A)	\$ 0.00		32. Debt Forgiven on Loans This Period	- 0.00
19. Total All Contributions Made This Election (Sum 15B + 18A)		\$ 0.00	33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
Other Disbursements	A. This Period	B. This Calendar Yr or Election Cycle	34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 1,989.53
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)	\$ 0.00			



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE HOPPE FOR COUNCIL		2. REPORT DATE 3/26/2012	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: CITY / STATE: View Supplemental Form(s) EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 6,697.32	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 6,697.32	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 6,635.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 62.32	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 62.32	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 6,635.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 6,635.00	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Mike Sleadd CITY / STATE: 607 Bluff Dale Dr Columbia MO 65201 EMPLOYER: Columbia College -- Assoc Professor <input type="checkbox"/> COMMITTEE:	2/20/2012 ----- \$ 111.34	\$ 32.50 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Dean Anderson CITY / STATE: 814 Timbers Columbia MO 65201 EMPLOYER: Univ of MO -- Health Educator <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 29.82	\$ 29.82 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim Curley & Mary Clerc CITY / STATE: 702 Crescent Rd Columbia MO 65201 EMPLOYER: Univ of MO -- Adj Assoc Prof of Journalism <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill & Susan Fales CITY / STATE: 1711 Cliff Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Chris & Kelly Hayday CITY / STATE: 106 Rockingham Dr Columbia MO 65203 EMPLOYER: Self-Employed -- Physician <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Laurie Hines CITY / STATE: 1608 Wilson Ave Columbia MO 65201 EMPLOYER: State of MO -- Special Projects <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cindy Neagle CITY / STATE: PO Box 10201 Columbia MO 65205 EMPLOYER: State of MO -- Senate Staff <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Wallace & Robin Remington CITY / STATE: 503 Taylor St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Helen Roehlke CITY / STATE: 705 Hilltop Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Terry & Jane Smith CITY / STATE: 1712 Cliff Dr Columbia MO 65201 EMPLOYER: Columbia College -- Vice-President <input type="checkbox"/> COMMITTEE:	2/19/2012 ----- \$ 90.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Veronica Manahan & Carlos Alvarado CITY / STATE: 2232 Shephard Blvd Columbia MO 65201 EMPLOYER: Self-Employed -- Attorney <input type="checkbox"/> COMMITTEE:	2/22/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonnie Trickey & Larry Gideon CITY / STATE: 708 Silverton Ct Columbia MO 65203 EMPLOYER: Resource Home Loans -- Vice-President <input type="checkbox"/> COMMITTEE:	2/22/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: United Working People of Mid-Mo CITY / STATE: Box 471 EMPLOYER: Fulton MO 65251 <input checked="" type="checkbox"/> COMMITTEE:	2/24/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Ragsdell CITY / STATE: 2002 Valley View Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/25/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Vicky Wilson CITY / STATE: 3201 Blackberry Ln Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/25/2012 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Priscilla Bevins CITY / STATE: 2907 Bluegrass Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Mark Haim CITY / STATE: 1402 Richardson Columbia MO 65201 EMPLOYER: Peace Nook -- Exec Director <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Hamilton CITY / STATE: 1614 Wilson Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 15.00	\$ 15.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy Harter CITY / STATE: 201 S Glenwood Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Wise and Toni Kazic CITY / STATE: 2308 Bluff Point Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Daniel Cullimore and Donna Kessell CITY / STATE: 715 Lyon Columbia MO 65201 EMPLOYER: Columbia MO 65201 <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David and Ann Mehr CITY / STATE: 714 Ingleside Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 600.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wiley Miller CITY / STATE: 1911 Dartmouth Columbia MO 65203 EMPLOYER: Self-employed -- Psychologist <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Victor Myers CITY / STATE: 4508 Mexico Gravel Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: David and Tiffani Smith CITY / STATE: 3808 Panther Columbia MO 65202 EMPLOYER: Smith & Parnell -- Attorney <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Still CITY / STATE: 2000 S Country Club Drive Columbia MO 65201 EMPLOYER: State of MO -- State Representative <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill and Eleanore Wickersham CITY / STATE: 3632 Augusta Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/6/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ted Farnen CITY / STATE: 5100 Blue Spruce Columbia MO 65201 EMPLOYER: State of MO -- Dept of Revenue <input type="checkbox"/> COMMITTEE:	3/7/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Lottes CITY / STATE: 10201 Burnett School Ashland MO 65010 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kim Parker CITY / STATE: 803 Alton Columbia MO 65201 EMPLOYER: Self-employed -- Home Management <input type="checkbox"/> COMMITTEE:	3/7/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herb and Sue Tillema CITY / STATE: 306 Westridge Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2012 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Julie Youmans CITY / STATE: 2101 Rock Quarry Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/7/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Greg Mermelstein CITY / STATE: PO Box 1837 Columbia MO 65205 EMPLOYER: State of Mo -- Attorney <input type="checkbox"/> COMMITTEE:	3/8/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeff Akers CITY / STATE: 1411 Anthony Columbia MO 65201 EMPLOYER: Univ of MO -- Merchandise Asst <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Helen and Doug Anthony CITY / STATE: 2804 Ashwood Columbia MO 65203 EMPLOYER: None -- Attorney <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peter Beiger CITY / STATE: 1411 Pratt Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 60.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonnie Bourne CITY / STATE: 1503 University Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wayne and Rachel Brekhuis CITY / STATE: 703 Hilltop Columbia MO 65203 EMPLOYER: Univ of MO -- Assoc Professor <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James Curley CITY / STATE: 702 Crescent Columbia MO 65201 EMPLOYER: Univ of MO -- Adjunct Assoc Prof <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim and Linda Harlan CITY / STATE: 511 S Glenwood Columbia MO 65203 EMPLOYER: Harlan Harlan Still -- Attorney <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
--	-------------------

INSTRUCTIONS

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Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Robert Hasheider CITY / STATE: 1403 Windsor Columbia MO 65201 EMPLOYER: City of Columbia -- Utility Dept <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dorothy Kyger CITY / STATE: 611 Bluff Dale Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Veronica Manahan CITY / STATE: 2232 Shepard Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonner Mitchell CITY / STATE: 14 Miller Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Peters CITY / STATE: 3808 Berrywood Columbia MO 65201 EMPLOYER: Self-employed -- Scientific instruments <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Phillips CITY / STATE: 1859 Cliff Columbia MO 65201 EMPLOYER: ABC Labs -- Senior Scientist <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Wallace and Robin Remington CITY / STATE: 503 Taylor St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dorothy Schoech CITY / STATE: 8 Carter Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION

CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Terry Smith CITY/STATE: 1712 Cliff Dr Columbia MO 65201 EMPLOYER: Columbia College -- Dean <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 130.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herb and Sue Tillema CITY/STATE: 306 Westridge Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/11/2012 ----- \$ 300.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Coke and Robert Blake CITY/STATE: 2322 Meadowlark Columbia MO 65201 EMPLOYER: Retired -- Physician <input type="checkbox"/> COMMITTEE:	3/12/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Guyette CITY/STATE: 10201 Burnett School Ashland MO 65010 EMPLOYER: Univ of MO -- Forestry Professor <input type="checkbox"/> COMMITTEE:	3/12/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Maggie and Lee Henson CITY/STATE: 3104 Greenbriar Columbia MO 65203 EMPLOYER: Univ of MO -- Program Coordinator <input type="checkbox"/> COMMITTEE:	3/12/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Horner CITY/STATE: 8901 S Ginn Ln Columbia MO 65201 EMPLOYER: MO Dept of Conservation -- Supervisor <input type="checkbox"/> COMMITTEE:	3/12/2012 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fred Young CITY/STATE: 2101 Rock Quarry Columbia MO 65201 EMPLOYER: USDA -- Soil scientist <input type="checkbox"/> COMMITTEE:	3/12/2012 ----- \$ 70.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Cooper CITY/STATE: 500 Longfellow Columbia MO 65203 EMPLOYER: Univ of MO -- Nurse <input type="checkbox"/> COMMITTEE:	3/13/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Roy and Kathleen Finley CITY/STATE: 7890 Turtle Creek Columbia MO 65203 EMPLOYER: Self-employed -- Developer <input type="checkbox"/> COMMITTEE:	3/13/2012 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hostetler Properties LLC CITY/STATE: 1204 Hulen Columbia MO 65203 EMPLOYER: <input type="checkbox"/> COMMITTEE:	3/13/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Francis Schmidt CITY/STATE: 505 Silverthorn Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	3/14/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jonathan and Nicole Galloway CITY/STATE: 115 Crestmere Columbia MO 65203 EMPLOYER: Boone Co -- Treasurer <input type="checkbox"/> COMMITTEE:	3/15/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Schmidt CITY/STATE: 1700 Forum Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/15/2012 ----- \$ 300.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steven Weinberg CITY/STATE: 807 W Broadway S Columbia MO 65203 EMPLOYER: Univ of MO -- Journalist <input type="checkbox"/> COMMITTEE:	3/15/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Nancy and Paul Copenhaver CITY/STATE: 1512 Ridgeline Moberly MO 65270 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/16/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Greenspan CITY/STATE: 505H Columbia Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/16/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: James and Christiane Quinn CITY / STATE: 719 W Broadway Columbia MO 65203 EMPLOYER: Sacred Heart -- Assistant <input type="checkbox"/> COMMITTEE:	3/16/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Reba Cassin CITY / STATE: 2001 Woodlink Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dee Dokken CITY / STATE: 804 Again Columbia MO 65203 EMPLOYER: Univ of MO -- Staff Nurse <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carrol Hardwick and Karen Dwyer CITY / STATE: 2255 Bluff Blvd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 300.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernadine Ford CITY / STATE: 1101 Bob O Link Columbia MO 65201 EMPLOYER: None <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ewing Ford CITY / STATE: 1101 Bob O Link Columbia MO 65201 EMPLOYER: Univ of MO -- Teaching Asst <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Fowler CITY / STATE: 606 N Sixth Columbia MO 65201 EMPLOYER: Univ of MO -- Coordinator <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Lehmann CITY / STATE: 2601 S Providence #3 Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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NAME: ADDRESS: David Leuthold CITY / STATE: 2000 Valley View Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joane O'Connor CITY / STATE: 2401 Tahoe Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald and Marie Scruggs CITY / STATE: 1913 Vassar Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jan Weaver CITY / STATE: 412-1/2 W Walnut Columbia MO 65203 EMPLOYER: Univ of MO -- Adj Asst Professor <input type="checkbox"/> COMMITTEE:	3/20/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: William Roy and Donna Dudark CITY / STATE: 3709 Falmouth Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marie Hunter CITY / STATE: 4310 Montpelier Columbia MO 65203 EMPLOYER: None <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas Lindberg CITY / STATE: 606 Bluff Dale Columbia MO 65203 EMPLOYER: Univ of MO -- Systems Analyst <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joyce Snow CITY / STATE: 711 Morningstar Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL	DATE 3/26/2012
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Helen and George Washburn CITY / STATE: 1908 Hatton Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen Wolfe CITY / STATE: 8000 Turner Farm Columbia MO 65201 EMPLOYER: Univ of MO -- Medical Technologist <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paula McFarling and Peter Yronwode CITY / STATE: 203 Orchard Columbia MO 65203 EMPLOYER: Univ of MO -- Assessment Coord <input type="checkbox"/> COMMITTEE:	3/22/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee HOPPE FOR COUNCIL		2. Report Date 3/26/2012	
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 309.57
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 309.57
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)			\$ 0.00
13. Subtotal: Any Attached Pages			+ 4,218.61
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 4,218.61
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 4,528.18
16. Amount of Line 15 Above which was Paid Out This Period			\$ 3,288.65
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 1,239.53
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



NAME OF COMMITTEE HOPPE FOR COUNCIL		DATE 3/26/2012
EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)		AMOUNT PAID OR INCURRED THIS PERIOD
CATEGORY OF EXPENDITURE		
Copies	\$	141.27
Electronic data	\$	15.00
Supplies	\$	153.30
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL: ITEMIZED EXPENDITURES THIS PAGE		
(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)	\$	--



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE HOPPE FOR COUNCIL		REPORT DATE 3/26/2012	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: Midwest Mailing ADDRESS: PO Box 723 CITY/STATE: Columbia MO 65205	3/2/2012	Mailing \$ 0.00	\$ 396.85 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Hotcards ADDRESS: 1600 East 23rd St CITY/STATE: Cleveland OH 44114	3/5/2012	Printing \$ 0.00	\$ 438.99 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Midwest Mailing ADDRESS: PO Box 723 CITY/STATE: Columbia MO 65205	3/19/2012	Mailing \$ 0.00	\$ 452.68 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Hotcards ADDRESS: 1600 East 23rd St CITY/STATE: Cleveland OH 44114	3/16/2012	Printing \$ 0.00	\$ 508.82 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Progressive Political Partners LLC ADDRESS: 4001 S Coats Ln CITY/STATE: Columbia MO 65203	3/22/2012	Strategic planning & mgmt \$	\$ 375.00 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Fast Signs ADDRESS: 2609 E Broadway Ste 200 CITY/STATE: Columbia MO 65201	2/21/2012	Signs/stickers \$ 0.00	\$ 889.39 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Columbia Daily Tribune ADDRESS: PO Box 798 CITY/STATE: Columbia MO 65205	3/13/2012	Advertising \$ 0.00	\$ 1,156.88 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY / STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --